SCC eFile	2014 ANNUAL REPORT 214531590 COMMONWEALTH OF VIRGINIA TATE CORPORATION COMMISSION				
1.) CORPORATION NAME:			DUE DATE:	8/31/2014	
Starr Surplus Lines Insuranc 2.) VA REGISTERED AGENT NAI CT CORPORATION SYSTEM			SCC ID NO: F1800871		
4701 COX ROAD, SUITE 285			5.) STOCK I	NFORMATION	
GLEN ALLEN, VA			CLASS	AUTHORIZED	
3.) CITY OR COUNTY OF VA RECHENRICO COUNTY	GISTERED OFFICE:		COMMON PREFNV	150,000,000 500,000	
4.) STATE OR COUNTRY OF INC	ORPORATION:				
6.) PRINCIPAL OFFICE ADDRESS	S:				
ADDRESS: Floor 3 500 W	:1 est Monroe Street				
CITY/ST/ZIP: Chica	ago, IL 60661				
7.) DIRECTORS AND PRINCIPAL		and principal gnated as bo	officers must l th a director ar	be listed. An individual nd an officer.	
		X OFFIC	ER	X DIRECTOR	
NAME: TITLE: ADDRESS:	CHARLES DANGELO PRESIDENT/CEO 399 Park Avenue				
CITY/ST/ZIP/CO:	8th Floor NEW YORK, NY 10022				
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID HATCHER BAKER VICE PRESIDENT 399 PARK AVENUE 8TH FLOOR NEW YORK, NY 10022	X OFFIC	ER	DIRECTOR	
		X OFFIC	ER	DIRECTOR	
NAME: TITLE: ADDRESS:	CARMELLA CAPITANO ASSISTANT VP 350 W. 55th Street				
CITY/ST/ZIP/CO:	Apt 90 New York, NY 10019				
NAME: TITLE: ADDRESS:	ALEX JOHN PITTIGNANO VICE PRESIDENT 399 PARK AVENUE 8TH FLOOR	X OFFIC	ER	DIRECTOR	
CITY/ST/ZIP/CO:	NEW YORK, NY 10022				
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD THOMAS VICE PRESIDENT 399 PARK AVENUE 8TH FLOOR NEW YORK, NY 10022	X OFFIC	ER	DIRECTOR	

		X	OFFICER		DIRECTOR	
NAME:	MICHAEL T. TORAN		J			
TITLE:	VP/CIO					
ADDRESS:	399 PARK AVENUE					
ADDITEOU.	9TH FLOOR					
CITY/ST/ZIP/CO:	NEW YORK, NY 10022					
	NEW TORK, NT 10022		-			
		X	OFFICER		DIRECTOR	
NAME:	WILLIAM TUCKER		_		_	
TITLE:	CFO/TREASURER					
ADDRESS:	FLOOR, 8					
	399 PARK AVENUE					
CITY/ST/ZIP/CO:	NEW YORK, NY 10022					
		Х	OFFICER		DIRECTOR	_
NAME:	RICHARD ALEXANDER BESSIN]			
TITLE:	SVP	OLI				
ADDRESS:	399 PARK AVENUE					
ADDITEOU.	8TH FLOOR					
CITY/ST/ZIP/CO:	NEW YORK, NY 10022					
	14277 10101, 141 10022		7			
		X	OFFICER		DIRECTOR	
NAME:	YONG CHEN		-		_	
TITLE:	ASST.CONTROLLER					
ADDRESS:	399 PARK AVENUE					
	8TH FLOOR					
CITY/ST/ZIP/CO:	NEW YORK, NY 10022					
		Х	OFFICER		DIRECTOR	
NAME:	NEHEMIAH GINSBURG] -			
TITLE:						
ADDRESS:	GC/SECRETARY 399 Park Avenue					
ADDRESS.						
CITY/ST/ZIP/CO:	8th floor New York, NY 10022					
0111/01/211/00:	11ew 10lk, 111 10022		_			
		X	OFFICER		DIRECTOR	
NAME:	JULIE MURRAY		-		_	
TITLE:	ASST SECRETARY					
ADDRESS:	399 PARK AVENUE					
	8TH FLOOR					
CITY/ST/ZIP/CO:	NEW YORK, NY 10022					
		Х	OFFICER		DIRECTOR	
NAME:	JAMES VENDETTI		J			
TITLE:	EVP/CUO					
ADDRESS:	399 PARK AVENUE					
ABBILLOG.	8TH FLOOR					
CITY/ST/ZIP/CO:	NEW YORK, NY 10022					
	,		Joernee		TRIRECTOR	
NIA NAT			OFFICER	Х	DIRECTOR	
NAME:	MICHAEL J. CASTELLI					
TITLE:	DIRECTOR					
ADDRESS:	FLOOR, 8					
0171/107/710/00	399 PARK AVENUE					
CITY/ST/ZIP/CO:	NEW YORK, NY 10022					
			OFFICER	Х	DIRECTOR	
NAME:	PAULA ALEXANDRA FRANCIS		J		_	
TITLE:	DIRECTOR					
ADDRESS:	Floor 31					
·=·-==:	500 West Monroe Street					
CITY/ST/ZIP/CO:	Chicago, IL 60661					
		_	1055055		75,555	
			OFFICER	Х	DIRECTOR	
NAME:	JOSEPH CHARLES HENRY JOH	INSO	N			
TITLE:	DIRECTOR					
ADDRESS:	FLOOR, 5, 19 PAR-LA-VILLE RO					
017 //07/7/2	HAMILTON HM11,BM,BERMUDA					
CITY/ST/ZIP/CO:	, , FN					

NAME:	MIGHAEL OREGORY (OZIOL	OFFICER	X DIRECTOR			
TITLE:	MICHAEL GREGORY KOZIOL DIRECTOR					
ADDRESS:	619 N. Florence Drive					
CITY/ST/ZIP/CO:	Park Ridge, IL 60608					
		OFFICER	X DIRECTOR			
NAME: TITLE:	BERTIL P. LUNDQVIST					
ADDRESS:	DIRECTOR 399 PARK AVENUE					
CITY/CT/ZID/CO.	17TH FLOOR					
CITY/ST/ZIP/CO:	NEW YORK, NY 10022					
NAME:	TIMOTUV JOOEDIJ MOODE	OFFICER	X DIRECTOR			
TITLE:	TIMOTHY JOSEPH MOORE DIRECTOR					
ADDRESS:	1111 S. Waukegan Road, Unit 6					
CITY/ST/ZIP/CO:	Lake Forest, IL 60045					
		OFFICER	χ DIRECTOR			
NAME:	WILLIAM O CONNOR					
TITLE: ADDRESS:	DIRECTOR FLOOR, 8					
ADDITEGO.	399 PARK AVENUE					
CITY/ST/ZIP/CO:	NEW YORK, NY 10022					
		X OFFICER	DIRECTOR			
NAME: TITLE:	David Norfleet					
ADDRESS:	VICE PRESIDENT Floor 31					
	500 West Monroe Street					
CITY/ST/ZIP/CO:	Chicago, IL 60661					
		X OFFICER	DIRECTOR			
NAME: TITLE:	Deborah Clark Assistant VP					
ADDRESS:	399 Park Avenue					
CITY/CT/7ID/CO.	8th floor					
CITY/ST/ZIP/CO:	New York, NY 10022					
NAME:		X OFFICER	DIRECTOR			
TITLE:	Jeffrey Constable R. Officer					
ADDRESS:	Floor 31					
CITY/CT/7ID/CO.	500 West Monroe Street					
CITY/ST/ZIP/CO:	Chicago, IL 60661					
NAME:	laka Duff	OFFICER	X DIRECTOR			
NAME: TITLE:	John Duffy DIRECTOR					
ADDRESS:	399 Park Avenue					
CITY/ST/ZIP/CO:	New York, NY 10022					
	ATION CONTAINED IN THIS ELEC					
COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.						
/s/ JULIE MURRAY	JULIE MURRAY, ASST		6/19/2014			
SIGNATURE OF DIRECTOR/OFFICER SECRETARY DATE LISTED IN THIS REPORT PRINTED NAME AND CORPORATE						
TITLE						
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material						

respect with the intent that the document be delivered to the Commission for filing.